



## No kidding — no bills for medical mistakes?

A heralded agreement by hospitals and surgery centers not to bill patients for medical mistakes deserves a healthy dose of incredulity. Why were hospitals charging patients for errors that shouldn't have happened in the first place?

Many restaurants decline to bill if diners are unsatisfied with a meal's quality. Medicine is entrusted with a responsibility far greater than filling our stomachs, yet it has done less than food establishments to make up for mistakes.

Credit Gov. Christine Gregoire for getting medical officials to see that halting this practice is in their best interest. Next step likely would have been legislation outlawing it. A handful of other states have already cracked down on billing for medical mistakes. Medicare no longer reimburses medical providers for the extra care resulting from some medical errors. Insurers BlueCross BlueShield Association and Aetna also plan to end such payments. A far more important task is to increase efforts to minimize medical mistakes. Otherwise, hospitals unable to bill insurers for the mistakes and unwilling to bill consumers are left bearing the costs.

Seattle Times reporter Carol Ostrom, in a story on the agreement, offers an upsetting example of the practice of billing for care received as a result of a medical mistake. A man undergoing surgery in Bellingham was left with severe burns to his throat and vocal cords. Adding insult to unimaginably painful injuries, the man was billed for more than \$66,000.

A list of 28 examples of medical errors, ranging from removing the wrong limb to leaving foreign objects in patients after surgery, set a baseline for mistakes the medical field ought not profit from. Sounds like a large list, but the impact promises to be more symbolic than budgetary. According to the Washington State Hospital Association, most hospitals are backing away from billing in cases of egregious mistakes. Likewise, doctors forgo payment.

Really serious medical mistakes are relatively rare, making their budget impact minimal. But they happen. And when they do, patients deserve an apology and better care — not a bill.

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